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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 09904295

|   |                       | CLAIMS A                                  | S FILED -<br>(Column |                               |              | (Column 2)       |          | SMALL ENTITY TYPE  |                        | OR     | OTHER THA           |                        |
|---|-----------------------|---|----------------------|-------------------------------|--------------|------------------|----------|--------------------|------------------------|--------|---------------------|------------------------|
| TOTAL CLAIMS  |                       |   | 104                  |                               |              |                  |          | RATE               | FEE                    | 1      | RATE                | FEE                    |
| FOR   |                       |   | NUMBER FILED         |                               | NUMBER EXTRA |                  |          | BASIC FEE          | <del> </del>           | OR     | BASIC FEE           |                        |
| TOTAL CHARGEABLE CLAIMS   |                       |   | 104minus 20=         |                               | . 84         |                  |          | X\$ 9=             |                        | OR     | X\$18=              | 1512                   |
| INDEPENDENT CLAIMS  |                       |   | 90 minus 3 =         |                               | 17           |                  |          | X40=               |                        | OR     | X80=                | 13/10                  |
| ML  | ILTIPLE DEPEN         | DENT CLAIM P                              | RESENT               |                               |              |                  | +135=    |                    | OR                     | +270=  | 121/2               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                       |   |                      |                               |              | column 2         | L        | TOTAL              |                        | OR     | TOTAL               | 3582                   |
| CLAIMS AS AMENDED - PART II   |                       |   |                      |                               |              |                  |          |                    | <del></del>            |        | OTHER               |                        |
|   |                       | (Column 1)                                | (Column 2            |                               |              | (Column 3)       | _        | SMALL              | ENTITY                 | OR     | SMALL               |                        |
| <b>AMENDMENT A</b>  |                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                 | . 105                                     | Minus                | 10                            | 24           | = /              |          | X\$ 9=             |                        | OR     | X\$18=              | 18                     |
|   | Independent           | NTATION OF MI                             | Minus                | PENIDENI                      | 20           | = /              |          | X40=               |                        | OR     | ×₩                  | 86                     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                       |   |                      |                               |              |                  |          | +135≟              |                        | ÓR     | +270=               |                        |
|   |                       |   |                      |                               |              | -                | L.       | TOTAL<br>DDIT. FEE |                        | OR     | TOTAL<br>ADDIT. FEE | 104                    |
|   |                       | (Column 1)                                |                      | (Colu                         | (Column 3)   |                  |          |                    |                        |        |                     |                        |
| AMENDMENT B   |                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                 | . 105                                     | Minus                | /                             | 05           | =                |          | X\$ 9=             |                        | OR     | X\$18=              |                        |
|   | Independent           | NTATION OF MIL                            | Minus                | ···                           | 21           | =                |          | X40=               |                        | OR     | X80=                |                        |
| لـــا   | THOTTHESE             | WINTON OF MIC                             | CHPCE DE             | EIADEIA                       | CLAIN        |                  | <b>'</b> | +135≂              |                        | OR     | +270≈               |                        |
| L   |                       |   |                      |                               |              |                  |          |                    |                        | OR     | TOTAL               |                        |
| ADDIT. PEE ADDIT. FEE   |                       |   |                      |                               |              |                  |          |                    |                        |        |                     |                        |
| O   | :                     | CLAIMS                                    |                      | HIGH                          | EST          | (Column 3)       | _        |                    | 4001                   | ſ      |                     | 455                    |
| AMENDMENT C   | in the State of the A | REMAINING<br>AFTER<br>AMENDMENT           |                      | PREVIO<br>PAID                | DUSLY        | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                 | •   | Minus                | **                            |              | =                |          | X\$ 9=             |                        | OR     | X\$18=              |                        |
|   | Independent           | •   | Minus                | ***                           |              | =                | -        | V40                |                        | ٠٠٠  ا |                     | <u> </u>               |
|   | FIRST PRESE           | NTATION OF MU                             | ILTIPLE DEF          | PENDENT                       | CLAIM        |                  | -        | X40=               |                        | OR     | X80=                |                        |
| * If the entry in column 1 is less than the entry in column 2, write 10" in column 3.   |                       |   |                      |                               |              |                  |          | +135=              |                        | OR     | +270=               |                        |
| **  | the "Highest Nur      | nber Previously Pa                        | id For IN THI        | S SPACE is                    | s less than  | 120. enter "20." | AC       | TOTAL<br>DDIT. FEE |                        | OR ,   | TOTAL<br>ODIT. FEE  |                        |
| ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                       |   |                      |                               |              |                  |          |                    |                        |        |                     |                        |